FEC FORM 3X

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Example: If typing, type

TYPE OR PRINT ▼

RECEIVED

2014 JUL 21 AM 10: 31 Office Use Only

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typir over the lines.	ng, type	FE4M5	THE CENTER
HUMANS FOR L	FARTH'S RIGHT	<u> </u>	<u> </u>		
ليبينين		<u> </u>	45.1 1 1-1		
ADDRESS (number and street)	16,1,1,6, GOL	DEM SADI	<u> </u>		
Check if different than previously reported. (ACC)	LAS VEGA	5		V 811	<i>30</i> -[
2. FEC IDENTIFICATION	NUMBER ▼ C	ITY 🛦	STA	TE _	ZIP CODE A
C0056.39			IEW N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	Report └── I Due On: ┌──	(= <u>)</u>	May 20 (M5) Jun 20 (M6)	Aug 20 (M8) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:	· 🛁		Jul 20 (M7)	Oct 20 (M10)	(Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly Report	(c) 12-Day	Primary (12F	·	General (12G)	Runoff (12R)
July 15 Quarterly Report	(Q2) PRE-Election Report for the:	Convention (12C)	Special (12S)	• • • • • • • • • • • • • • • • • • •
October 15 . Quarterly Report January 31 Year-End Report		ion on	المحرار المحرار	<u> </u>	in the
Year-End Report July 31 Mid-Year Report (Non-elect Year Only) (MY)	tion (d) 30-Day POST-Election	General (300		Runoff (30R)	Special (30S)
Termination Repo		ion on		~~~	in the State of
5. Covering Period	04 61 201	4 through	06	30 20	741
Type or Print Name of Treasurer PAVID B. CONNECLY					
Signature of Treasurer Date 07 01 2014					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.					
Office Use Only					C FORM 3X Rev. 12/2004